

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 8
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Workers' Voice			FEC IDENTIFICATION NUMBER ▼ C C00484287		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee Deepika Mehta			Date M M / D D / Y Y Y Y Y Y Y Y 09 / 04 / 2012		
Mailing Address 6004 Maiden Lane			Amount 1440.00		
City Bethesda		State MD	Zip Code 20817		
Purpose of Expenditure Design Web Materials		Category/ Type 004		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 153036.74			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
Full Name (Last, First, Middle Initial) of Payee Mack Crounse Group			Date M M / D D / Y Y Y Y Y Y Y Y 09 / 04 / 2012		
Mailing Address 2001 N. Beauregard Street Suite 420			Amount 1600.00		
City Alexandria		State VA	Zip Code 22311		
Purpose of Expenditure Design Fliers		Category/ Type 004		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 153036.74			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....			3040.00		
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures.....					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Ms. Elizabeth H Shuler</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y Y Y 09 / 05 / 2012	

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Workers' Voice		FEC IDENTIFICATION NUMBER ▼ C C00484287	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	
Full Name (Last, First, Middle Initial) of Payee Mack Crounse Group		Date MM / DD / YYYY 09 / 04 / 2012	
Mailing Address 2001 N. Beauregard Street Suite 420		Amount 1000.00	
City Alexandria	State VA	Zip Code 22311	Transaction ID : D448133
Purpose of Expenditure Design Fliers	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 153036.74		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Mack Crounse Group		Date MM / DD / YYYY 09 / 04 / 2012	
Mailing Address 2001 N. Beauregard Street Suite 420		Amount 200.00	
City Alexandria	State VA	Zip Code 22311	Transaction ID : D448135
Purpose of Expenditure Design Fliers	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 153036.74		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		1200.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures.....			
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Ms. Elizabeth H Shuler</p> <p>Signature _____ [Electronically Filed] Date MM / DD / YYYY 09 / 05 / 2012</p>			

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Workers' Voice			FEC IDENTIFICATION NUMBER ▼ C C00484287		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee Mosaic			Date M M / D D / Y Y Y Y Y Y 09 / 04 / 2012		
Mailing Address 4801 Viewpoint Place			Amount 3420.00		
City Cheverly State MD Zip Code 20781		Transaction ID : D448173			
Purpose of Expenditure Fliers		Category/ Type 004		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 153036.74			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
Full Name (Last, First, Middle Initial) of Payee Mosaic			Date M M / D D / Y Y Y Y Y Y 09 / 04 / 2012		
Mailing Address 4801 Viewpoint Place			Amount 450.00		
City Cheverly State MD Zip Code 20781		Transaction ID : D448174			
Purpose of Expenditure Fliers		Category/ Type 004		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama				Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 153036.74			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....			3870.00		
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures.....					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Ms. Elizabeth H Shuler</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 09 / 05 / 2012	

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Workers' Voice			FEC IDENTIFICATION NUMBER ▼ C C00484287		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee AFL-CIO			Date M M / D D / Y Y Y Y Y Y Y Y 09 / 04 / 2012		
Mailing Address 815 Sixteenth Street, N.W.			Amount 309.91		
City Washington State DC Zip Code 20006-4101		Transaction ID : D448176			
Purpose of Expenditure Walk Packets		Category/ Type 004		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 153036.74			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee AFL-CIO			Date M M / D D / Y Y Y Y Y Y Y Y 09 / 04 / 2012		
Mailing Address 815 Sixteenth Street, N.W.			Amount 309.91		
City Washington State DC Zip Code 20006-4101		Transaction ID : D448177			
Purpose of Expenditure Walk Packets		Category/ Type 004		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama				Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 153036.74			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			619.82		
(b) SUBTOTAL of Unitemized Independent Expenditures▶					
(c) TOTAL Independent Expenditures.....▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Ms. Elizabeth H Shuler</u>			Date M M / D D / Y Y Y Y Y Y Y Y 09 / 05 / 2012		
[Electronically Filed]					

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Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account			Date M M / D D / Y Y Y Y Y Y 09 / 04 / 2012		
Mailing Address 1625 L Street, NW			Amount 1134.92		
City Washington State DC Zip Code 20036		Transaction ID : D448309			
Purpose of Expenditure In Kind Staff		Category/ Type 001		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 153036.74			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
Full Name (Last, First, Middle Initial) of Payee AFSCME Special Account			Date M M / D D / Y Y Y Y Y Y 09 / 04 / 2012		
Mailing Address 1625 L Street, NW			Amount 1134.92		
City Washington State DC Zip Code 20036		Transaction ID : D448310			
Purpose of Expenditure In Kind Staff		Category/ Type 001		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama				Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 153036.74			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....			2269.84		
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures.....					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Ms. Elizabeth H Shuler</u>			Date M M / D D / Y Y Y Y Y Y 09 / 05 / 2012		
[Electronically Filed]					

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(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Workers' Voice	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00484287 </div>
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 09 / 04 / 2012 </div>
Mailing Address 100 Indiana Avenue, N.W.		Amount <div style="border: 1px solid black; padding: 2px;"> 980.52 </div>
City Washington	State DC	
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">153036.74</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D448311

Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 09 / 04 / 2012 </div>
Mailing Address 100 Indiana Avenue, N.W.		Amount <div style="border: 1px solid black; padding: 2px;"> 980.52 </div>
City Washington	State DC	
Purpose of Expenditure In Kind Staff	Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">153036.74</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D448312

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 1961.04 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px;"> _____ </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

Signature

M M / D D / Y Y Y Y Y Y
 09 / 05 / 2012

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(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Workers' Voice			FEC IDENTIFICATION NUMBER ▼ C C00484287		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee			Date M M / D D / Y Y Y Y Y Y Y Y 09 / 04 / 2012		
Mailing Address 11720 Beltsville Drive #700			Amount 203.00		
City Beltsville		State MD	Zip Code 20705		Transaction ID : D448313
Purpose of Expenditure In Kind Staff		Category/ Type 001		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 153036.74			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee			Date M M / D D / Y Y Y Y Y Y Y Y 09 / 04 / 2012		
Mailing Address 11720 Beltsville Drive #700			Amount 203.00		
City Beltsville		State MD	Zip Code 20705		Transaction ID : D448314
Purpose of Expenditure In Kind Staff		Category/ Type 001		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama				Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 153036.74			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....			406.00		
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures.....					
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Ms. Elizabeth H Shuler</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date M M / D D / Y Y Y Y Y Y Y Y 09 / 05 / 2012</p>					

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Workers' Voice		FEC IDENTIFICATION NUMBER ▼ C C00484287	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)		Date MM / DD / YYYY 09 / 04 / 2012	
Mailing Address 1325 Massachusetts Ave. NW		Amount 69.04	
City Washington	State DC	Zip Code 20005	Transaction ID : D448315
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 153036.74		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)		Date MM / DD / YYYY 09 / 04 / 2012	
Mailing Address 1325 Massachusetts Ave. NW		Amount 69.04	
City Washington	State DC	Zip Code 20005	Transaction ID : D448316
Purpose of Expenditure In Kind Staff	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 153036.74		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	138.08
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	13504.78

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Elizabeth H Shuler

[Electronically Filed]

Date

MM / DD / YYYY
09 / 05 / 2012

Signature